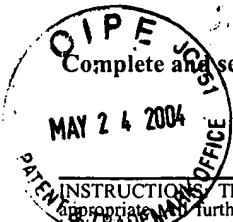


05/26/04

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE  
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P.O. Box 1450  
Alexandria, Virginia 22313-1450  
or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. Further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590

03/01/2004

Sandra M. Kotin  
One Fairchild Place  
P.O. Box 550  
Monticello, NY 12701

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Sandra M. Kotin	(Depositor's name)
<i>Sandra M. Kotin</i>	(Signature)
May 24, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/671,371	09/25/2003	Gloria Strait	244-P	1858

TITLE OF INVENTION: PORTABLE DEVICE FOR CURING GEL NAIL PREPARATIONS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	06/01/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
GILL, ERIN M	2881	250-455110

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 SANDRA M. KOTIN  
2 \_\_\_\_\_  
3 \_\_\_\_\_

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☐ government

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Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

*Sandra M. Kotin* May 24, 2004

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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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01 FC:2501  
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665.00 OP  
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TRANSMIT THIS FORM WITH FEE(S)

*Sandra M. Kotin*

*admitted to practice  
before the U.S. Patent  
and Trademark Office*

*One Fairchild Place, P.O. Box 550, Monticello NY 12701 (845) 791-6141*

May 24, 2004

Mail Stop ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313 - 1450

Re:  
Applicant(s): Gloria Strait  
Title: Portable Device for Curing Gel Nail Preparations  
Serial Number: 10/671,371  
Filing Date: 09/25/03  
Group Art Unit: 2881  
Examiner: Gill, Erin M.  
Not. of Allow: 3/01/04

Dear Sir:

With reference to the above noted application, enclosed please find the following:

1. Issue fee and Publication fee transmittal
2. Check in amount of \$965.00 for issue fee  
and publication fee  
(Applicant's) check no. 1386 ) UTILITY PATENT
3. Return postcard

Please be advised that applicant Gloria Strait is still claiming **small entity status**.

Very truly yours;

*Sandra M. Kotin*  
Sandra M. Kotin  
Registration Number  
32,577

Encl.

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on May 24, 2004

*Sandra M. Kotin*  
Sandra M. Kotin